Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Democratic Party of Wisconsin Federal 15 N. Pinckney St ADDRESS (number and street) Suite 200 (Check if address is changed) Madison 53703 WI CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS compliance@wisdems.org (Check if address X is changed) Optional Second E-Mail Address reporting@capcompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.wisdems.org (Check if address is changed) DATE 2022 C00019331 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Udell, Randy, A.,, Type or Print Name of Treasurer Udell, Randy, A.,, [Electronically Filed] 02 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

FEC <b>F</b>	orm 1 (Revised 02/2009)	Page <b>2</b>
TYPE OF	COMMITTEE te Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.	)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	nplete the candidate
Name of Candidate		
Candidate Party Affilia	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		(Demogratio
(d) <b>x</b>	This committee is a STA (National, State or subordinate) committee of the DEM	(Democratic, Republican, etc.) Party.
Political	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
Cor	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.		
4.		

FFC Form 1 (Povised	03/3000\	Dogo 2
FEC Form 1 (Revised Write or Type Committee Name		Page <b>3</b>
	rty of Wisconsin Federal	
	Organization, Affiliated Committee, Joint Fundraising Representative, or	Loadorchin DAC Sponsor
-		Leadership PAC Sponsor
DNC WI State Party V	ictory Fund	
Mailing Address	430 South Capitol St SE	
	Washington	20003
	CITY STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
<ol> <li>Custodian of Records: Ider books and records.</li> </ol>	ntify by name, address (phone number optional) and position of the perso	on in possession of committee
Udell, Rar	ndy, A., ,	
	15 N. Pinckney St	
Mailing Address	Suite 200	
	Madison	53703
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 608	
Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and assistant treasurer).	d the name and address of
Full Name Udell, Ran	ıdy, A., ,	ı
of Treasurer	15 N. Pinckney St	
Mailing Address		
	Suite 200	
		53703
Title or Position	CITY STATE	ZIP CODE
Treasurer	608 Telephone number	

	n 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
	oxes or maintains funds.	
Name of Bank, I	Depository, etc.  Amalgamated Bank  275 Seventh Ave	
Name of Bank, I	Depository, etc.  Amalgamated Bank	
Name of Bank, I	Depository, etc.  Amalgamated Bank  275 Seventh Ave	ZIP CODE
Name of Bank, I	Depository, etc.  Amalgamated Bank  275 Seventh Ave  New York  NY  10011  CITY  STATE	ZIP CODE
Name of Bank, I	Depository, etc.  Amalgamated Bank  275 Seventh Ave  New York  NY  10011  CITY  STATE	ZIP CODE
Name of Bank, I	Depository, etc.  Amalgamated Bank  275 Seventh Ave  New York  CITY  STATE  Depository, etc.	ZIP CODE

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

5(g) (	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected  Dollars for Democ	Organization, Affiliated Committee, Joint Fundrais	ing Representativ	e, or Leadership PAC Sponsor
	Mailing Address	430 South Capitol St SE		
		Washington	DC	20003
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	ndraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Telep	phone Number	
9.		ries: List all banks or other depositories in which the	e committee deposit	es funds, holds accounts, rents
		lic Bank		, , , , , , , , , , , , , , , , , , ,
	Name of Bank, Depository, etc.			
	Name of Bank, Repub	lic Bank		
	Name of Bank, Depository, etc.	lic Bank 601 West Market St		
	Name of Bank, Depository, etc.	lic Bank	KY	40588

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

Page \_6\_ **of** \_9\_\_\_

5(g) o	or(h). <b>Joint Fundraisi</b> n	g Participant:	
	1.		FEC ID number
	2.		FEC ID number
	3.		FEC ID number C
	4.		FEC ID number
6.	Name of Any Connected Baldwin Wisconsi		sing Representative, or Leadership PAC Sponsor
	Mailing Address	PO Box 259965	
		Madison	WI 53725
	Relationship:	CITY ▲	STATE ▲ ZIP CODE ▲
	Connected	Organization Affiliated Committee	fundraising Representative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)	
	Full Name		
	Mailing Address		
		1	
	TITLE OR POSITION	▼ CITY ▲	STATE ▲ ZIP CODE ▲
			phone Number
	safety deposit boxes or ma	ries: List all banks or other depositories in which the intains funds.  ated Bank  3002 Fish Hatchery Rd	ne committee deposits funds, holds accounts, rents
		Fitchburg	WI 54713
		CITY ▲	STATE ▲ ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Democratic Gras	sroots Victory Fund		
	430 South Capitol Street SE		
Mailing Address	430 South Capitol Silvert SE		
	Washington	DC L	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	
esignated Agent: Identif	fy by name, address (phone number – optional)		
esignated Agent: Identif	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identif	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identife Full Name Mailing Address	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identification  Full Name	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisir</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
		FEC ID number	С
4		J	
	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spor
Biden Victory Fur	nd 		
Mailina Adalaa	430 South Capitol Street SE		
Mailing Address			
	Washington	DC DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X J y by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC S
esignated Agent: Identif			ative Leadership PAC S
esignated Agent: Identif			Leadership PAC S
esignated Agent: Identif			
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif  Full Name    Mailing Address	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or ma	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or ma	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mane of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mane of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h). <b>Joint Fundraisi</b>	ng Participant:		
1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
Badger Victory F	und 2020		
AA 30	<sub>I</sub> 15 N. Pinckney St		
Mailing Address	Suite 200		
	Madison	WI WI	53703
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	3 sp	ative Leadership PAC Sponsor
8. <b>Designated Agent:</b> Identi	fy by name, address (phone number – optional)		
8. <b>Designated Agent:</b> Identi			
8. <b>Designated Agent:</b> Identi			
8. <b>Designated Agent:</b> Identi			
8. <b>Designated Agent:</b> Identi	fy by name, address (phone number – optional)	STATE A	
8. <b>Designated Agent:</b> Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
8. Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which the	STATE A	ZIP CODE A